

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1223 / 1831
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Hillary

A.

Full Name (Last, First, Middle Initial)
Ina Rosenthal
Mailing Address 101 W 90th St # 8

City State Zip Code
New York NY 10024-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Actor

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
08 / 28 / 2008

Transaction ID: C2832908

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Transfer from Authorized
Cte/Redesignation

B.

Full Name (Last, First, Middle Initial)
Jane L Rosenthal
Mailing Address 375 Greenwich St Fl 8
8TH FLOOR

City State Zip Code
New York NY 10013-2376

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tribeca Films

Occupation
Co-Founder/Producer

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY
08 / 28 / 2008

Transaction ID: C2832738

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Transfer from Authorized
Cte/Redesignation

C.

Full Name (Last, First, Middle Initial)
Paul Rosenthal
Mailing Address 6631 Landon Ln

City State Zip Code
Bethesda MD 20817-5637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kelley Drye & Warren

Occupation
Attorney

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY
08 / 28 / 2008

Transaction ID: C2834758

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Transfer from Authorized
Cte/Redesignation

SUBTOTAL of Receipts This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶